

SERIAL NUMBER 09/443,947	FILING DATE 11/19/99	CLASS 370	GROUP ART UNIT 2739	ATTORNEY DOCKET NO. 50325-098
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APPLICANT

SHAI MOHABAN, SUNNYVALE, CA; ITZHAK PARNAFES, CUPERTINO, CA.

\*\*CONTINUING DOMESTIC DATA\*\*\*\*\*  
VERIFIED

\*\*371 (NAT'L STAGE) DATA\*\*\*\*\*  
VERIFIED

\*\*FOREIGN APPLICATIONS\*\*\*\*\*  
VERIFIED

IF REQUIRED, FOREIGN FILING LICENSE GRANTED 12/20/99

Foreign Priority claimed 35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance	STATE OR COUNTRY CA	SHEETS DRAWING 4	TOTAL CLAIMS 20	INDEPENDENT CLAIMS 6
Verified and Acknowledged Examiner's Initials _____ Initials _____					

ADDRESS  
MCDERMOTT WILL & EMERY  
600 13TH STREET NW  
WASHINGTON DC 20005-3096

TITLE

AUTOMATICALLY APPLYING BI-DIRECTIONAL QUALITY OF SERVICE TREATMENT TO  
NETWORK DATA FLOWS

FILING FEE  
RECEIVED

\$1,160

FEES: Authority has been given in Paper  
No. \_\_\_\_\_ to charge/credit DEPOSIT ACCOUNT  
NO. \_\_\_\_\_ for the following:

- ☐ All Fees
- ☐ 1.16 Fees (Filing)
- ☐ 1.17 Fees (Processing Ext. of time)
- ☐ 1.18 Fees (Issue)
- ☐ Other \_\_\_\_\_
- ☐ Credit



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COMMISSIONER FOR PATENTS  
UNITED STATES PATENT AND TRADEMARK OFFICE  
WASHINGTON, D.C. 20231  
www.uspto.gov



Bib Data Sheet

CONFIRMATION NO. 7979

<b>SERIAL NUMBER</b> 09/443,947	<b>FILING DATE</b> 11/19/1999 <b>RULE</b>	<b>CLASS</b> 370	<b>GROUP ART UNIT</b> 2739 266 7	<b>ATTORNEY DOCKET NO.</b> 50325-098
<b>APPLICANTS</b> SHAI MOHABAN, SUNNYVALE, CA; ITZHAK PARNAFES, CUPERTINO, CA; <b>** CONTINUING DATA *****</b> <i>No</i> <b>** FOREIGN APPLICATIONS *****</b> <i>No</i>				
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** 12/20/1999</b>				
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged <i>[Signature]</i> <i>[Initials]</i> Examiner's Signature Initials		<b>STATE OR COUNTRY</b> CA	<b>SHEETS DRAWING</b> 4	<b>TOTAL CLAIMS</b> 20
				<b>INDEPENDENT CLAIMS</b> 6
<b>ADDRESS</b> Christopher J. Palermo Hickman Palermo Troung & Becker LLP 1600 Willow Street San Jose ,CA 95125-5106				
<b>TITLE</b> AUTOMATICALLY APPLYING BI-DIRECTIONAL QUALITY OF SERVICE TREATMENT TO NETWORK DATA FLOWS				
<b>FILING FEE RECEIVED</b> 1160	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit _____	